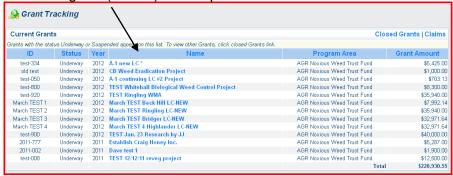
Claim Requests through WebGrants

Noxious Weed Trust Fund (NWTF) grant projects that were approved for funding will submit reimbursement claims online through the WebGrants system. Please use the following instructions to request reimbursements.

- Login to WebGrants at https://funding.mt.gov/
- Go to My Grants



Click on the name of the grant (in blue) that requires reimbursement.



Click on the Claims Grant Component.



Update 10/2021 Page **1** of **6**

Claim Requests through WebGrants

This screen will appear. Click Add to start the claim process.



In the "Report Period" (from and to) boxes, click on the calendar icons to enter the time period covered by this claim. Select **Reimbursement** from the **Claim Type** dropdown list. If this is the last claim that will be submitted for the grant, check the box next to "Final Request" Click **Save** when completed.



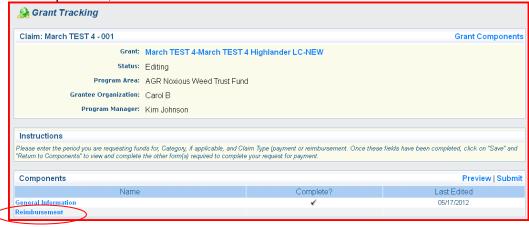
Update 10/2021 Page **2** of **6**

Claim Requests through WebGrants

This screen will appear. Click Return to Components.



In Components, click on Reimbursement.



The "Contract Budget" is shown on the reimbursement screen.

In the "Expenses This Period" column, enter the amounts you are requesting in the appropriate budget categories. Enter the "Match Expenses This Period" amounts in the appropriate budget categories. Click **Save**.

| Reimbursement | | | | | | |
|----------------------------------|--------------------|-------------------------|-----------------------------|-------------------|-------------------------------|-------------------------|
| Budget Category | Contract Budget | Expenses This Period | Prior Expenses (Paid) | Contract Match | Match Expenses This Period | Prior Match Expenses |
| Budget | | | | | | |
| Communications | \$0.00 | \$0.00 | \$0.00 | \$150.00 | \$0.00 | \$0.00 |
| Travel | \$0.00 | \$0.00 | \$0.00 | \$112.00 | \$0.00 | \$0.00 |
| Other Expenses | \$0.00 | \$0.00 | \$0.00 | \$150.00 | \$0.00 | \$0.00 |
| Contracted Services - Other | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Supplies & Materials - Other | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Contracted Services - Herbicide | | | | | | |
| Contracted Services - Herbicide | \$32,120.39 | \$0.00 | \$0.00 | \$32,120.39 | \$0.00 | \$0.00 |
| Supplies & Materials - Herbicide | | | | | | |
| Supplies & Materials - Herbicide | \$851.25 | \$0.00 | \$0.00 | \$851.25 | \$0.00 | \$0.00 |

Update 10/2021 Page **3** of **6**

Claim Requests through WebGrants

An updated screen will appear with totals and available balances. Review the amounts.

| Reimbursement Mark as Complete Go to Claim Forms | | | | | | | | | | | |
|--|--------------------|----------------------------|-----------------------------|------------|----------------------------------|-------------------|----------------------------------|----------------------------|----------------|--------------------------------|---------------------|
| Budget Category | Contract Budget | Expenses This Period | Prior Expenses (Paid) | Paid | Available Balance (Unpaid) | Contract Match | Match Expenses This Period | Prior Match Expenses | Total Match | Remaining Match Requirement | Match Percentage |
| Budget | | | | | | | | | | | |
| Communications | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$150.00 | \$0.00 | \$0.00 | \$0.00 | \$150.00 | - |
| Travel | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$112.00 | \$0.00 | \$0.00 | \$0.00 | \$112.00 | |
| Other Expenses | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$150.00 | \$0.00 | \$0.00 | \$0.00 | \$150.00 | - |
| Contracted Services - Other | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | - |
| Supplies & Materials - Other | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | - |
| Contracted Services - | Herbicide | | | | | | | | | | |
| Contracted Services - Herbicide | \$32,120.39 | \$1,500.00 | \$0.00 | \$1,500.00 | \$30,620.39 | \$32,120.39 | \$1,500.00 | \$0.00 | \$1,500.00 | \$30,620.39 | 50.00% |
| Supplies & Materials - | Herbicide | | | | | | | | | | |
| Supplies & Materials - Herbicide | \$851.25 | \$0.00 | \$0.00 | \$0.00 | \$851.25 | \$851.25 | \$0.00 | \$0.00 | \$0.00 | \$851.25 | - |
| Total | \$32,971.64 | \$1,500.00 | \$0.00 | \$1,500.00 | \$31,471.64 | \$33,383.64 | \$1,500.00 | \$0.00 | \$1,500.00 | \$31,883.64 | 50.00% |

If you need to make any changes to the claim, click **Edit** at the top of the screen.

Supplies & Materials - Herbicide Supplies & Materials - \$851.25

Herbicide

\$0.00

Total: \$32,971.64 \$1,500.00

\$0.00

If the claim is correct click Mark as Complete. 🌑 Menu | 🧸 Help | 📲 Log Out Sack | 🔌 Print | 🜓 Add | 💢 D (ete | 📝 Edit 🕥 🔌 Grant Tracking Claim: March TEST 4 - 001 Grant Components Grant: March TEST 4-March TEST 4 Highlander LC-NEW Status: Editing Program Area: AGR Noxious Weed Trust Fund Grantee Organization: Carol B Program Manager: Kim Johnson Instructions NOTE: The budgeted amount for each category is shown in the "Contract Budget" column. This amount cannot be exceeded by more than 10% per line item unless a Contract Amendment is submitted to request a revised budget. Mark as Complete | Go to Claim Forms Reimbursement Budget Category

Contract
Budget
This
Expenses
Prior
Expenses
Prior
Expenses
Prior
Expenses
Prior
Expenses
Prior
Expenses
Match
Match
Match
Mis Prior
Expenses
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Mis Prior
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Match Remaining Match Match Percentage Communications \$0.00 \$0.00 \$0.00 \$0.00 \$150.00 \$0.00 \$0.00 \$0.00 \$150.00 Other Expenses \$0.00 \$0.00 \$0.00 \$0.00 \$150.00 \$0.00 \$0.00 \$0.00 \$150.00 Contracted Services - \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Supplies & Materials - \$0.00 Other \$0.00 \$0.00 \$0.00 \$0.00 Contracted Services - Herbicide Ontracted Services - \$32,120.39 \$1,500.00 \$0.00 \$1,500.00 \$30,620.39 \$32,120.39

Update 10/2021 Page 4 of 6

\$0.00 \$851.25 \$851.25

\$0.00 \$1,500.00 \$31,471.64 \$33,383.64

\$0.00

\$0.00

\$0.00

\$851.25

50.00%

Claim Requests through WebGrants

In the Claim components, click on Claim Reciepts.



Click Add.



Use the **Choose File** button and select the receipt documents that back up your claim amounts. Write a description of what you have attached. Click **Save**.

| Attach File |
|--|
| REQUIRED:Claim Documentation Form |
| Itemize receipt information, then attach with receipts. |
| Attach Scanned Invoices: |
| Herbicide and commercial applicator receipts and records, salary records, and all other expenditures that you are requesting for reimbursement. To attach the documentation click on "Add" at the top. |
| Please make attached files as small (low resolution) as possible. |
| Upload File: Choose File No file chosen Description:* |

Update 10/2021 Page **5** of **6**

Claim Requests through WebGrants

Click Mark as Complete.



Click Preview to view and if desired, print a copy of your claim.

Click the back button in the upper part of the screen to return to the submit screen.

Click Submit to send in your claim.



Click OK and your claim will be submitted.



Update 10/2021 Page **6** of **6**